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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/FR01/01205 04/19/2001

** FOREIGN APPLICATIONS *****

FRANCE 00/05025 04/19/2000
 FRANCE 00/13101 10/04/2000
 FRANCE 00/15215 11/24/2000

** SMALL ENTITY **

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	FRANCE	9	8	1
Verified and Acknowledged Examiner's Signature: Initials:				

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TITLE
 Electronic payment method and device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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